

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED By Carol Day at 9:42 am, Sep 17, 2014

REPORT #7

| Complete this report in duplicat Send copy to Department of He | | | | | | | d whene | ever instrument is repaire | ≱d, |
|---|-----------------------------|---|--------------------------------|---------------|---|----------------------|----------------|-----------------------------|-----------------|
| ALCO SENSOR IV SN 102454 | PRINTER SN 095,3583,044 | | | | DATE OF 09/12 | INSPECTION 1/2014 | | | |
| LOCATION OF INSTRUMENT (STREET AND CITY) C.C.S.O 1 Court Circle Suite 13, Camdenton, Mo, 65020 | | | | | | | TIME OF 4:36 (| INSPECTION am | |
| CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument. | | | | | | | | | |
| DIGITAL READOUT (ALL ELEMENTS OPERATIONAL) | | | | | | | | | |
| ☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C) | | | | | | | | | |
| PRINTER WORKING PROPERLY | | | | | | | | | |
| ☑ TIME AND DATE DISPLAYING PROPERLY | | | | | | | | | |
| BREATH ALCOHOL ACCURAC | CY STANDA | RDS | an manawiya an ono an an an an | | With the State of | | | | romates |
| SIMULATOR SOLUTION | m | | | | | ED ETHANOL-G | | | |
| STANDARD SUPPLIER Int | oximeters | | -/ | LOT # AG23 | 3201 | EXP. DATE | 11/27/2 | 2014 | |
| SIMULATOR TEMPERATURE | 0.2°C) SIMULATOR SN | | | l | SIMULATOR EXP DATE | | | | |
| CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or tess. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE | | | | | | | | | |
| TEST 1 ☞ ,104 | TEST 2 ≈ .104 | | | | TEST 3 ≠ .104 | | | | |
| RFI DETECTOR OPERATING | | | | | | | | | |
| INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS) | | | | | | | | | |
| REFUSALS 0 (004) | 0 | (.0509) | 0 | (.1014) | 0 | (,15-,19) | 0 | (OVER .19) 0 | |
| List any new parts and describe established limits (use other side N/A | any alterati if necessar | on or modificat y). | ion that | was made to | restore | the instrument t | o operat | te satisfactorily and withi | in |
| NSPECTINGORAGER | | | • | | | | | | |
| SIGNATURE | Dutes | | | | Print NAME Jason A. Sylvester | | | | |
| 77PE II PERMIT NUMBER EXPIRATION DATE 230346 / 12/31/2015 | | | | | | (573) 346-224 | | | Salara Language |
| Return completed report to the | 2875 Jan | cohol Program les Boulovard uff, MO 63901 | , MO De _l | partment of H | ealth an | d Senior Service | es, Souti | iceast District Office | - { |
| > (11.4 }F1.6}, to | · Aprico Ci | | 100 mm 1 | = 4 | | | | | |



Airgas Mid America (LABORATORY)

3500 Bernard Street St. Louis, Mo. 63103 Ph: (314) 533-3100

Fax: (314) 533-7328

Certificate of Analysis

Customer Name Intoximeters, Inc. 2081 Craig Road St. Louis, Mo 63146

Test Date: 27-Nov-2012

Dear Sir,

This is your Certificate of Analysis:

Exp. Date 11/27/2014 Cyl. Type 108

Component Ethanol

Nitrogen

Certifled Concentration 0.100 ± 2% BrAC (272 ppm)

Balance

Lot#

AG233201

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

| Serial No. Concentration EB0010581 391.5 ppm EB0010570 258.4 ppm EB0010285 208.9 ppm EB0010561 101.9 ppm EB0010681 53.0 ppm | Serial No. EB0010603 EB0010559 EB0010595 EB0010562 EB0010579 | Concentration 390.9 ppm 258.3 ppm 209.2 ppm 104.9 ppm 52.4 ppm |
|---|---|---|
|---|---|---|

Analytical Method:

NDIR

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

78 10 Sarial not 182454 AS IV Second on a supple of Version and the torking red sint TEST RECORD 160316 and a suffer of the state of THE RESERVE OF LAND 37 Term Help Time 2191. 715W The second secon Air Blackt 7 - 77-944 47<mark>712714-94149 - 66</mark>9 1 In ration Charles 3 1897275 Mora 181 医乳红毛病 卖 English of Francisco Adrial Tir Chemical Control J. Sylvester Sylves ! J. Sylvester 2462 J. Sylucsie 2460 330396 C C.S.O. CC 20 J.C. 50

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1. Sylvesky 2463 3. Sylvesky 3. Sylves



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



PERMIT TYPE II

JASON A SYLVESTER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

| DATE 12/3 | 31/2013 | wante |
|-------------------------|---------|--|
| 01112 | | DIRECTOR OF STATE PUBLIC HEALTH LABORATORY |
| NUMBER 230 | 346 | Dan Vanter Org |
| EXPIRES 12/3 | 31/2015 | |
| | | DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES |
| LECT RECUEST AT 103-101 | | 1.414.4.132.441 |

LAB 4 (R6-10)

